**LLEBG** 

## KANSAS CRIMINAL JUSTICE COORDINATING COUNCIL

## OFFICE OF THE GOVERNOR

## **FEDERAL GRANTS PROGRAM**

300 SW 10TH AVENUE, SUITE 212S, TOPEKA, KS 66612-1590

FAX: (785) 291-3204

## GRANT PROJECT NARRATIVE REPORT Due October 30

The information provided on this report will be used by the Governor's Federal Grants Program Staff to review progress on the funded grant projects. No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing laws and regulations. The information in this report will be shared with the U.S. Department of Justice, Bureau of Justice Assistance and the Kansas Criminal Justice Coordinating Council.

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1. NAME AND ADDRESS OF SUBGRANTEE ORGANIZATION	2. GRANT PROJECT NUMBER	
	3. REPORTING PERIOD (MM/DD/YY)	
	FROM: / / TO:	1 1
4. TITLE OF GRANT PROJECT	5. GRANT AMOUNT	6. DATE OF REPORT
7. NAME AND TITLE OF AUTHORIZED AGENCY REPRESENTATIVE	8. SIGNATURE	9. PHONE NUMBER
PLEASE RESPOND TO THE FOLLOWING QUESTIONS. A SEPANECESSARY.	RATE SHEET OF PAPER MAY BE	ATTACHED IF
10. Describe how the goals and the objectives of the grant project a and objectives have or have not been met.	re being met. If this is the final repo	ort, explain how the goals
11. Provide anecdotal information regarding the use of the equipme		ject, the frequency of its
use, and what impact it has had on reducing crime in the community	and improving public safety.	
For Office of the Governor's Federal Grants Program Use		Rev. 10/04
Approved by:		Date: